

SELF EMPLOYMENT / S-CORP INCOME AFFIDAVIT

Please complete this form if a member of your household receives income as a business owner, independent contractor, sole proprietorship, cash pay, odd jobs, gig economy jobs (like **Uber/Lyft**) etc.

You MUST complete and submit all applicable sections within this document.

Please submit all supporting documentation along with these forms.

Applicant/Tenant: _____

Name and Type of Business: _____

Position Held: _____

Start Date: _____

Section 1: Prior Tax Year's Self-Employment / 1099-MISC / S-Corp (including K-1) Income

Gross Income from Last Tax Year \$ _____

Gross Expenses from Last Tax Year \$ _____

Net Income from Last Tax Year \$ _____

You are required to provide your complete tax returns from the most recent two (2) years of filing, including all schedules, 1099s, etc.

Please proceed to Section 2.

Section 2: Year to Date Self-Employment / 1099-MISC / S-Corp (including K-1) Income

Gross Income Year to Date \$ _____

Gross Expenses from Year to Date \$ _____

Net Income from Year to Date \$ _____

You are required to complete the Year to Date Profit and Loss Statement in the following pages, and provide supporting documentation for your year-to-date gross income and expenses, which may include invoices, receipts, contracts, independent contractor pay stubs or pay statements, written business plans, employment proposals, business bank account statements, and/or accountant statements for business income, etc. Please provide whatever documentation is available to verify your income and expenses, all income must be documented.

Check here if you anticipate no changes in your revenue, expenses, or net income over the next 12 months: ☐

If you checked this box, please provide a signed, dated, and notarized letter to that effect, and skip to section 4 on the next page.

If you did not check this box, please proceed to section 3 on the next page.

All households, please proceed to the next page.

Section 3: Anticipated Self-Employment / 1099-MISC / S-Corp (including K-1) Income Over the Next 12 Months (Complete this section if you did NOT check the box at the bottom of the previous page)

Anticipated Gross Annual Income \$ _____

Anticipated Gross Annual Expenses \$ _____

Net Anticipated Annual Income \$ _____

You are required to complete the Anticipated Profit and Loss Statement in the following pages in addition to the Year to Date Profit and Loss Statement previously requested, in addition to providing any and all supporting documentation for the changes that will take place to your income and/or expenses over the next 12 months.

Please proceed to section 4.

Section 4: Signature and Required Documentation Summary

As a reminder, all households who completed this form must submit:

- Complete IRS 1040 tax returns from the two (2) previous tax years, in addition to all applicable tax documents.
- A completed Year to Date Profit and Loss Statement on the following page.
- Supporting documentation for your year-to-date gross income and expenses, which may include invoices, receipts, contracts, independent contractor pay stubs or pay statements, written business plans, employment proposals, business bank account statements, and/or accountant statements for business income, etc. Please provide whatever documentation is available to verify your income and expenses.

If you completed Section 3, you must additionally submit:

- A completed Anticipated Profit and Loss Statement on the page following the Year to Date Profit and Loss Statement.
- Supporting documentation for the changes that will take place to your income over the next 12 months.

If you cannot provide your tax returns for the previous calendar year, or did not report your self-employment / S-Corp income on your tax returns for the previous year, you must additionally submit:

- A completed Prior Year Profit and Loss Statement, located on the page following the Anticipated Profit and Loss Statement.
- Supporting documentation for the income you received in the previous calendar year.

All Households must complete the following:

Under penalty of perjury, I certify that the information presented in this form and in the following profit and loss forms is true and accurate to the best of my knowledge. The undersigned further understand that providing false representation herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement or application review.

Applicant Signature

Date

Year to Date Profit and Loss Statement							Business Name:						
Please fill in month and year →													YEARLY TOTAL
Revenue Source													
Total Revenue													
Cost of Sales													
Total Cost of Sales													
Gross Income (Total Revenue minus Total Cost of Sales)													
Expenses													
Total Expenses													
Net Income (Gross Profit minus Total Expenses)													

Anticipated Profit and Loss Statement for the Next 12 Months							Business Name:						
Please fill in month and year →													YEARLY TOTAL
Revenue Source													
Total Income													
Cost of Sales													
Total Cost of Sales													
Gross Income (Total Revenue minus Total Cost of Sales)													
Expenses													
Total Expenses													
Net Income (Gross Profit minus Total Expenses)													

Prior Year Profit and Loss Statement							Business Name:						
Please fill in month and year →													YEARLY TOTAL
Revenue Source													
Total Revenue													
Cost of Sales													
Total Cost of Sales													
Gross Income (Total Revenue minus Total Cost of Sales)													
Expenses													
Total Expenses													
Net Income (Gross Profit minus Total Expenses)													

Please note the following page is an example of a completed Profit and Loss Statement. This is intended only as an example of what a completed Year to Date Profit and Loss Statement may look like.

Year to Date Profit and Loss Statement Example as of 10/2016							Business Name: Example Bicycle Shop LLC						
Please fill in month and year (i.e. January 2016) →	Jan 2016	Feb 2016	March 2016	April 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016	N/A	N/A	N/A	YEARLY TOTAL
Revenue Source													
Bike Sales	1500	1500	1500	1500	1500	2000	1500	200	2500				13700
Bike Service	600	700	600	600	600	900	600	0	1000				5600
Total Revenue	2100	2200	2100	2100	2100	2900	2100	200	3500				19300
Cost of Sales													
Cost of Goods (Bikes)	700	700	700	700	700	1200	700	100	1500				7000
Cost of Parts (Service)	100	150	100	100	100	300	100	0	350				1300
Total Cost of Sales	800	850	800	800	800	1500	800	100	1850				8300
Gross Income (Total Revenue minus Total Cost of Sales)	1300	1350	1300	1300	1300	1400	1300	100	1650				11000
Expenses													
Payroll expenses	100	100	100	100	100	100	100	100	100				900
Supplies (office and operating)	50	50	50	50	50	50	50	50	50				450
Repairs and maintenance	0	100	0	0	0	0	0	300	0				400
Advertising	20	20	20	20	20	20	20	20	20				180
Car, delivery and travel	50	50	50	50	50	50	50	50	50				450
Accounting and legal	0	0	0	200	0	0	0	0	0				200
Rent	600	600	600	600	600	600	600	600	600				5400
Utilities	40	40	40	40	40	40	40	40	40				360
Website Maintenance	40	40	40	40	40	40	40	40	40				360
Total Expenses	900	1000	900	1100	900	900	900	1200	900				8700
Net Income (Gross Profit minus Total Expenses)	400	350	400	200	400	500	400	-1100	750				2300